

# Don't Fight It Tooth and Nail: Your Dentist is on Your Side during Pregnancy!

**By Beth Conover, APRN, CGC MotherToBaby Nebraska, UNMC**

"There are so many risks to the baby if I go for dental work, right?" "What about x-rays?" "I don't like going to the dentist anyway, so I'll probably just wait until my baby is born. That should be fine, right?" Worries, excuses, we've heard it all at MotherToBaby when it comes to dental procedures during pregnancy. We often receive questions from women wondering whether dental care is safe. In short, the answer is....yes! What better time to talk about the reasons why it's ok than during June - typically the month the American Dental Association dubs as "Oral Health Month."

## **Routine dental care is low risk, and most emergency procedures can be done as well.**

Good oral health improves your overall health, and increases your chances of a good pregnancy outcome. However, when you are scheduling a dental appointment and are pregnant (or trying to get pregnant), let the office know so that they can be prepared to make decisions about which procedures are safe for your baby. In some cases, you or your dentist may want to wait until after delivery for elective (non-necessary) procedures.

Here are some commonly asked questions we get from pregnant women:

- **When I brush my teeth, my gums have started to bleed. Is this normal? What should I do?**

Bleeding gums is a common problem during pregnancy. Pregnant women have hormonal changes that can increase their chances of getting gum problems such as gingivitis (puffy and tender red gums that bleed easily). Your dentist will want to monitor this so that it does not progress to a more serious gum disease. Periodontal disease is a bacterial infection of the gums and jaw bones that support the teeth, and can increase your chances of having a smaller baby, delivering early, and having other pregnancy complications. Dentists recommend that you floss daily, and get your teeth cleaned on a regular basis during pregnancy (consider having it done more frequently, if you are having pregnancy gingivitis).

- **It seems like pregnancy is causing me to get more cavities in my teeth...am I right?**

Pregnancy can contribute to women having more cavities. This is in part due to changes in diet such as frequent snacks including sugary foods. To prevent cavities, eat a healthy diet and brush your teeth after eating sweets. In addition, if you have morning sickness, the acid from your stomach can affect your tooth enamel and make cavities more likely. Rinse your mouth with water or mouthwash after morning sickness episodes. If your toothpaste is making your morning sickness worse, ask your dentist for the name of a bland-tasting toothpaste.

- **What if I need to get a cavity filled or a tooth pulled? Can I have a local anesthetic?**

Agents like lidocaine which are injected into your gums are low risk for your baby. In one study, researchers compared pregnant women who received lidocaine injections as part of dental treatment with women who did not, and found no significant increase in risk for miscarriage, prematurity, or birth defects. If you need a pain medication, your dentist will take into account where you are in your pregnancy so as to make a choice that is safest for your baby.

- **Are dental x-rays safe in pregnancy?**

You may choose to have routine X-rays done prior to pregnancy, or to delay them until after you deliver - talk to your dentist about the best options for you. However, if you have a dental emergency and need to have them done, don't

hesitate. Advances in technology have made dental X-rays safer, and they do not involve as much radiation or may not involve radiation at all. Your dental office will cover your neck and abdomen with a lead apron, which lessens the exposure to your baby even more.

- **What else can I do to ensure dental health?**

Schedule a visit to your dentist before you are pregnant. Get teeth cleaned, gums examined, and any dental issues addressed prior to pregnancy.

Brush your teeth at least twice a day and floss once a day. This helps reduce plaque, the sticky film that covers your teeth and can make gums inflamed and increase your risk for periodontal disease.

I hope I've given you a few good tips to chew on - Your teeth and baby will thank you. Have a healthy pregnancy!



***Beth Conover, APRN, CGC, is a genetic counselor and pediatric nurse practitioner. She established the Nebraska Teratogen Information Service in 1986, also known as MotherToBaby Nebraska. She was also a founding board member of the Organization of Teratology Information Specialists (OTIS). In her clinical practice, Beth sees patients in Pharmacogenetics Clinic and Genetics Clinic at the University of Nebraska Medical Center. Beth has provided consultation to the FDA and CDC.***

***About MotherToBaby***

***MotherToBaby is a service of the Organization of Teratology Information Specialists (OTIS), suggested resources by many agencies including the Centers for Disease Control and Prevention (CDC). If you have questions about exposures during pregnancy and breastfeeding, please call MotherToBaby toll-FREE at 866-626-6847 or try out MotherToBaby's new text information service by texting questions to (855) 999-3525. You can also visit [MotherToBaby.org](https://www.MotherToBaby.org) to browse a library of fact sheets about dozens of viruses, medications, vaccines, alcohol, diseases, or other exposures during pregnancy and breastfeeding or connect with all of our resources by downloading the new MotherToBaby free app, available on Android and iOS markets.***

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://www.MotherToBaby.org).

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A couple of weeks ago, a friend of mine who is in her second trimester of pregnancy, called me in a panic. Due to her recent medical history, it was recommended that she get an MRI in addition to her yearly mammogram as a way to screen for breast cancer. She, like many women who have the same question, was relieved and grateful to get this information. She then asked, "do women get diagnosed with cancer in pregnancy? Can they be treated?"

## ***What We Know about Cancer in Pregnancy***

Yes, cancer occurs in about one in a thousand pregnancies every year. The most commonly diagnosed cancers in pregnancy are breast, cervical, Hodgkin's disease, malignant melanoma, and leukemias. It can be tricky to diagnose cancer during pregnancy because common cancer symptoms such as fatigue, changes in the breasts, bloating, headaches, rectal bleeding, blotchy skin, and achy joints can also be symptoms of pregnancy.

## **Diagnosis**

Cancer can be diagnosed in different ways, including physical exams, biopsies, blood tests, ultrasounds and pap smears – all of which are used in pregnancy. But what about other tests?

- X-rays can be used to diagnose cancer during pregnancy. The level of radiation used during an x-ray is too low to cause any known harm to the developing baby. When possible, women can use a lead shield that covers the abdomen during x-rays.
- Computed tomography (CT or CAT) scans of the head or chest do not directly expose the developing baby to radiation. CT scans of the abdomen or pelvis can be done in pregnancy if absolutely necessary.
- Magnetic resonance imaging (MRI) does not use radiation and can be used in pregnancy.

Once diagnosed, the next thing to consider are various treatment options. Cancer can be successfully treated during pregnancy, but there are some important things to think about such as the size and location of the tumor, if the cancer has spread to other body parts, how far along you are in the pregnancy, and any other health conditions you may have.

- Many medications used for cancer treatment (chemotherapeutic agents) are usually not given in the first trimester of pregnancy, because that's when a lot of the baby's development is happening. However, it's possible to use them in the second or third trimesters. This can vary based on many factors, including the medication itself.
- Surgical procedures (including using anesthesia) can usually be done during pregnancy.
- For treatments such as radiation, hormone therapy, and targeted therapies, it's often suggested to wait until after the baby is born.
- Depending on the exact treatments and medications, breastfeeding may or may not be recommended.

Thankfully, my friend's MRI is normal at this time. She was reminded to watch for any changes in her breasts and keeping an eye on any symptoms. Remember, whether you are pregnant or not, it's always best to report any concerns to your healthcare provider as soon as possible. This way you can be properly evaluated, and treated if necessary, because most of the time a healthier mom leads to a healthier baby.

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